Fill in this informa	tion to identify your case:		
Debtor 1	Craig B. Deimler		
Debtor 2 (Spouse, if filing)	William O. Fisher-Deimler		
United States Bar	nkruptcy Court for the: MIDDLE DISTRICT OF P	ENNSYLVANIA	
Case number			Check if this is:
(If known)			An amended filing
			A supplement showing postpetition chapter 13 income as of the following date:
Official Form 106I			MM / DD/ YYYY
Schedule	I: Your Income		12/15
supplying correct spouse. If you are attach a separate	nd accurate as possible. If two married people t information. If you are married and not filing je separated and your spouse is not filing with yes sheet to this form. On the top of any additional scribe Employment	ointly, and your spouse is living you, do not include information a	with you, include information about your bout your spouse. If more space is needed,
1. Fill in your	employment	ebtor 1	Debtor 2 or non-filling spouse

information. Employed ■ Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Minister of Music** sales Include part-time, seasonal, or Employer's name **Alco Products Co Inc** self employed self-employed work. **Employer's address** Occupation may include student Zion Lutheran Evangelical Church 11512 Schuylkill Rd or homemaker, if it applies. 265 N Enola Dr N Bethesda, MD 20852-2428 Enola, PA 17025 How long employed there? 2 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

For Debtor 1

For Debtor 2 or non-filling spouse

2. \$ 17,587.05 \$ 0.00

3. Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

3. +\$ <u>0.00</u> +\$ <u>0.00</u> 4. \$ <u>17,587.05</u> \$ <u>0.00</u>

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Main Document

Debtor 1 Craig B. Deimler
William O. Fisher-Deimler Case number (if known)

				For	Debtor 1		Debtor 2 or filing spouse	
	Сору	line 4 here	4.	\$	17,587.05	\$	0.00	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	4,355.88	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	1,758.70	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	671.39	\$	0.00	
	5e.	Insurance	5e.	\$	1,047.41	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	_ 5h.+	\$	0.00	- \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	7,833.38	\$	0.00	
7.		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	9,753.67	\$	0.00	
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	¢	225 70	\$	4.059.00	
	8b.	Interest and dividends	оа. 8b.	ş—	335.70 0.00	\$	1,958.92 0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	OD.	Ψ	0.00	Ψ	0.00	
		settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	- \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	335.70	\$	1,958.92	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	10	,089.37 + \$_	1,9	58.92 = \$ 12	2,048.29
11.	Includ other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a lify:	depen		•		chedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The res that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certai</i> es					12. \$12	2,048.29 d
13.		ou expect an increase or decrease within the year after you file this form No.	?				monthly	
		Yes. Explain: Anticipated increase in monthly business income	e bv \$	600.0	0.			

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